

Attorney's Docket No. 550,643

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, We hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type:

- ☒ original
- ☐ design
- ☐ supplemental
- ☐ divisional
- ☐ continuation
- ☐ continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

Our residence, post office address and citizenship are as stated below next to our names, We believe we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

**CONTROL PROGRAM, FOR A CO-PROCESSOR IN A VIDEO-ON-DEMAND
SYSTEM, WHICH USES TRANSMISSION CONTROL LISTS TO SEND
VIDEO DATA PACKETS WITH RESPECTIVE SUBGROUPS OF
INTERNET PROTOCOL HEADERS**

SPECIFICATION IDENTIFICATION

the specification of which: (complete (a), (b) or (c))

- (a) ☒ is attached hereto.
- (b) ☐ was filed on _____ as ☐ Serial No.
or ☐ Express Mail No., as Serial No. not yet known

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

We hereby state that we reviewed and understand the contents of the above identified specification, including the claims, as amended by an amendment referred to above.

We acknowledge the duty to disclose information

- which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56 and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and

☐ In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.

POWER OF ATTORNEY

We hereby appoint the following attorneys to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

CHARLES J. FASSBENDER, REG. NO. 28,504
MARK T. STARR, REG. NO. 28,762

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DECLARATION

We hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURES

Full name of first inventor

Kent
(GIVEN NAME)

M.
(MIDDLE INITIAL OR NAME)

Campbell
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1001021-22601001

Full name of second inventor:

| | | |
|---------------|--------------------------|-----------------------|
| <u>Robert</u> | <u>Louis</u> | <u>Jacobs</u> |
| (GIVEN NAME) | (MIDDLE INITIAL OR NAME) | FAMILY (OR LAST NAME) |

Inventor's signature Robert Louis Jacobs

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Full name of third inventor:

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Inventor's signature *John Waldimars Ulis*

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1001093-1001093

| Variable | Mean | SD | Min | Max |
|-------------------|------|------|------|------|
| Age | 38.5 | 12.5 | 18 | 65 |
| Gender | 0.5 | 0.5 | 0 | 1 |
| Marital status | 0.7 | 0.5 | 0 | 1 |
| Education | 12.5 | 2.5 | 9 | 16 |
| Income | 3500 | 1500 | 1000 | 8000 |
| Health status | 0.8 | 0.4 | 0 | 1 |
| Stress level | 4.5 | 1.5 | 1 | 7 |
| Life satisfaction | 5.5 | 1.5 | 1 | 9 |
| Work-life balance | 6.5 | 1.5 | 1 | 9 |
| Family support | 7.5 | 1.5 | 1 | 9 |
| Community support | 6.5 | 1.5 | 1 | 9 |
| Work environment | 6.5 | 1.5 | 1 | 9 |
| Healthcare access | 7.5 | 1.5 | 1 | 9 |
| Education quality | 7.5 | 1.5 | 1 | 9 |
| Income stability | 7.5 | 1.5 | 1 | 9 |
| Health insurance | 8.5 | 1.5 | 1 | 9 |
| Work-life balance | 7.5 | 1.5 | 1 | 9 |
| Family support | 7.5 | 1.5 | 1 | 9 |
| Community support | 7.5 | 1.5 | 1 | 9 |
| Work environment | 7.5 | 1.5 | 1 | 9 |
| Healthcare access | 7.5 | 1.5 | 1 | 9 |
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| Community support | 7.5 | 1.5 | 1 | 9 |
| Work environment | 7.5 | 1.5 | 1 | 9 |
| Healthcare access | 7.5 | 1.5 | 1 | 9 |
| Education quality | | | | |

Inventor's signature Stephen R. Bates

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2021-11-14 14:14:14